

Montgomery Cares Advisory Board

July 22, 2020 Meeting Notes

MCAB Members Present: Julia Doherty, Sarah Galbraith-Emami, Dr. Travis Gayles, Sybil Greenhut, Lynda Honberg, Yuchi Huang, Peter Lowet, D. Maria Rice, Langston Smith, Wayne Swann

MCAB Members Absent: Betsy Ballard, Sharron Holquin, Marie Mann,

DHHS Staff: Magda Brown, Tara Clemons, LaSonya Kelly, Robert Morrow, Christopher Rogers, Rebecca Smith

Primary Care Coalition: Elizabeth Arend, Leslie Graham, Hillery Tumba

Guest: Diana Saladani, Crystal Townsend

The Chair, Wayne Swann, called the meeting to order at 6:11 pm. Meeting held via video/teleconference during COVID-19 period.

Item		Action Follow-up	Person Assigned	Due Date
1.	<p>Approval of Minutes – June 24, 2020</p> <p><i>Moved by Yuchi Huang</i> <i>Seconded by Sybil Greenhut</i></p>		Wayne Swann	
2.	<p>Montgomery Cares Advisory Board Chair Report</p> <p>Wayne highlighted the agenda items and mentioned that it had been a very busy week with the County Council while they work to approve spending. The County Executive is looking for savings plan.</p>		Wayne Swann	
3.	<p>Update: Coronavirus</p> <p>Dr. Gayles explained that there has been an uptick on the number of cases in Maryland but not in Montgomery County. He noted that test volume has increased with pop up and self-collecting testing and the current sites will expand. He also explained that mobile testing is taking place 5-6 days a week and noted that the ready group is back out at nursing home facilities.</p> <ul style="list-style-type: none"> ▪ The County’s test positivity rate is at 3.3% placing the County at 14th compared to other jurisdictions. <p>Dr. Gayles mentioned that the County is currently at a plateau and therefore not ready to move to phase 3. He also noted that 40 out of 50 states have shown an increase in the number of cases and despite the County’s significant improvement, we are still having 60-80 daily new cases. Dr. Gayles stated that 13% of the County’s population has</p>		Dr. Travis Gayles/Dr. Rogers	

	<p>been tested (about 140K) and that Covid-19 has disproportionately affected some communities.</p> <p>Discussion:</p> <ul style="list-style-type: none"> ▪ Sybil questioned if there was a breakdown available by age group. Dr. Gayles explained that a new trend shows higher percentage in the Baltimore Metropolitan Area (BMA). Statewide, the younger population percentage is higher 10-19 y/o. Under the age of 20 the percentage is higher than age group over 50. These numbers led to school closures for the 1st semester. ▪ Lynda asked if the self-administered tests were proven to be effective. Dr. Gayles explained that all tests used are FDA approved and the sensitivity can vary in each method. There are three different modalities currently being used. ▪ There were questions about MCPS and the disparities stemming from COVID closures. Dr. Gayles explained that all that is happening now has highlighted the disparities issues within the system. It has opened the door for a conversation to improve the barriers that could impair the ability to access resources ▪ Wayne requested more information regarding the efforts to help the Latino community. Dr. Gayles explained that the May-June numbers have decreased, 73% of cases were from the Latino community and test positivity rate was 23.8% now it is 1.5% and 3% in the high zip codes. He further explained that many factors are influencing this but working on increasing all efforts to test and outreach. 			
<p>4.</p>	<p>Health Care for the Uninsured Report See Report and handout</p> <p style="text-align: right;">Tara Clemons</p> <p>Monthly Status Report Tara reviewed the data for the Health Care for the Uninsured programs:</p> <p>Tara explained that the Health Care for the Uninsured the program will not have a savings plan nor a reduction to the FY21 budget. County Council voted on a special appropriation adding \$500,000 to Montgomery Cares per the COVID-19 health emergency. Additionally, the appropriation allocated \$2 million for a competitive grant program for Montgomery County-based independent primary care medical and dental practices. Still waiting for further guidance on how the funds are to be used. Tara also mentioned that 5 interviews for new members will be held on June 23rd.</p> <p>Montgomery Cares has served 23,804 patients through June with a total of 61,293 patient visits at the ten participating clinics. The clinics expended 85% of the FY20 budgeted amount for encounters. DHHS is extending the block payment schedule for an additional 3 months to allow for telehealth and in-person visits.</p> <ul style="list-style-type: none"> • Beginning September 2020, we will begin reporting the number of telehealth/telemedicine visits to MCAB. PCC and DHHS are working on a plan to permanently provide telehealth/telemedicine through the MCares contract • QHP eligible clients end dates were moved from June 30th to December 31st to not interrupt their medical care. The letter was mailed by the County on July 1st 			

<p>Care for Kids Total program enrollment through June is 6,230 which is a 12% increase over the same time last year.</p> <ul style="list-style-type: none"> ▪ COVID-19: all of the CFK providers are conducting telehealth. Any children 2 and younger are being seen in person to manage immunizations and primary care. ▪ School Based Health Centers (SBHC's): MCPS will not have in-person classes through first semester of academic year. MCPS is seeking the ability to allow buildings to remain open in a limited capacity for essential purposes, such as meal services and perhaps medical services. We are working under our summer status and scheduling children who are treated at school-based health centers at different locations. Seeing children only for sick visits <p>The Maternity Partnership Program's enrollment through June was 1,434 teens and women, a -3% decrease in enrollment compared with FY19.</p> <ul style="list-style-type: none"> ▪ White Oak Medical Center will no longer be a Maternity Partnership provider as of December 2020. This was the decision of the hospital; they do not want to provide outpatient services. They will continue to provide delivery services for pregnant woman <p>Dental Services</p> <ul style="list-style-type: none"> • The dental clinics are only open for emergency appointments. The Dennis Avenue clinic and 1401 Rockville pike are the only locations open. • Dental is slated to open more chairs by the end of July. At that time, most of our infrastructure upgrades should be taken care of, the entire staff will have been fit tested for N95's, and we should have appropriate personal protective equipment needed to safely operate the clinic. • At this point, the Dental staff do not expect that we will see the same utilization daily that we saw before COVID. <p>Health Care for the Homeless</p> <ul style="list-style-type: none"> • Health Care for the Homeless has a new primary care provider (Kelly Collaborative Medicine) for the contract in the shelters including the expansion of services including a nurse case management and providing primary care to unsheltered clients. • COVID-19: SEPH has tested a total of 721 clients and staff within the Continuum of Care (COC) partnership. Total of 20 positives within our total COC to date (includes shelter, permanent supportive housing and other housing programs). The continues to do mass on a weekly basis with a rotating schedule between the aforementioned housing programs. • A total of 72 clients checked out of the hotel sponsored through the County after a positive COVID19 test, needed for quarantine due to possible exposure, awaiting test results and/or unable to appropriately isolate or quarantine within the community. Currently Homeless has one client in the hotel. <p><u>Discussion</u></p> <ul style="list-style-type: none"> • Langston asked how the dental needs were being met and why utilization was less regardless of COVID-19. Tara noted that staff had mentioned people wanting to avoid exposure, they are not eager to be seen unless it is an emergency 			
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<p>5.</p>	<p>FY21 Data/Performance Measures See presentation/slides</p> <p>Yuchi was nominated to run this committee. He would like to talk to Dr. Rogers about the data that is needed.</p> <p>Tara highlighted the Community and Covid-19 data report from the PACS (Planning Accountability and Customer Service) Team and asked board members to send her any questions or requests for additional information so she could request it from the PACS team.</p>	<p>MCAB Members</p>		
<p>6.</p>	<p>FY21 Sept. Strategic Planning Committee's Breakouts</p> <p>The Board members decided not to break into groups but chose to discuss as a whole instead.</p> <p><u>Discussion</u></p> <ul style="list-style-type: none"> • Lynda feels that the priority should be to maintain the safety-net and continue access care • Langston mentioned that anything the Board discusses, and plans will be around Covid-19 • Tara showed the FY20 MCAB Priorities from the planning meeting on 10/23/2019 to the board and reminded the board that 270k had to be added to Care for Kids (pre-Covid-19) • Julia expressed concerns about access to medical services for Care for Kids in the fall • There was concern expressed over what the telehealth payments will look like in the future. • Peter mentioned that it would be helpful to MCAB if the operations team provided them with feedback as well as their ideas 	<p>Wayne Swann</p>		
<p>7.</p>	<p>MCAB Committee Report Out Priority Discussion Items for Sept 2020</p> <p><u>Discussion</u></p> <ul style="list-style-type: none"> • Wayne suggested to identify 3 or 4 items from the operations side to advocate for and have the committee refine the goals from last year based on the current needs • Langston mentioned that a template should be given to dental showing what's needed in order to have proper data • Wayne will work with LaSonya and Amanda to figure out the needs of the health care for the homeless program • Peter expressed concern regarding QHP eligibility Vs. Affordability and coming up with a solution without removing access • Wayne asked the Committee Chairs to look at the 2020 priorities and come up with a list of the priorities they feel should continue to be advocated for and present at the September meeting 	<p>Wayne Swann</p>		

<p>8. September 2020 Agenda & Retreat Wayne Swann</p> <p><u>Discussion</u></p> <ul style="list-style-type: none"> • Various board members wanted the new members to attend the planning meeting and felt that if not confirmed, then the meeting should be postponed • Julia suggested to include Board Development as part of the planning meeting, and it was decided that a dedicated block of time will be allocated for Board Development at the October meeting • Julia volunteered to work along with any other volunteers on Board Development • Wayne suggested that Dr. Crowel attend the meeting to provide his input regarding financial stability • Julia and Peter would like to bring someone to discuss telehealth • Peter has questions he would like to have discussed at the meeting regarding whether fee for service is the right way moving forward and what are other options. He also mentioned that the TROIKA has 3-4 items to be brought up and discussed at the strategic planning meeting • Lynda requested that the planning meeting is recorded or at the very least the speakers are. • Tara mentioned that Councilmember Gabe Alvornoz is confirmed for the September 23rd meeting. <p>The next meeting will be September 23, 2020 with a tentative schedule of 4:00pm – 7:00pm</p>			
<p>9. Meeting Adjourned at 8:29pm</p> <p><i>Motion to adjourn: Langston Smith</i> <i>Seconded: Julia Doherty</i> <i>Unanimously approved</i></p>			

Respectfully submitted,

Tara O. Clemons
Montgomery Cares Advisory Board